2005 FOR PROFIT CORPORATION **ANNUAL REPORT** 

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## FILED Mar 25, 2005 08:00 AM **DOCUMENT # P02000109268 Secretary of State** MATHIS DEVELOPMENT, INC. Principal Place of Business Mailing Address 701 EL VERGEL LANE 701 EL VERGEL LANE ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080 03232005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3735198 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BOLES, JOSEPH L JR. DO NOT WRITE 120 CHARLOTTE ST. ST. AUGUSTINE, FL 32084 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (PRITE, Registered Agent signature required when reinstaling) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE MATHIS, JANE M NAME STREET ADDRESS 701 EL VERGEL LANE CITY-ST-ZIP ST. AUGUSTINE, FL 32080 TITLE 0000002759**0**7 MATHIS, ROBERT KJR. 03/25/05-80018-025 150.00 STREET ADDRESS 701 EL VERGEL LANE CITY- ST- ZIP ST. AUGUSTINE, FL 32080 THLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-7/P 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if